PLEASE PRINT

## STATE OF NEW HAMPSHIRE

## 2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

APR 2 4 2019

I. Name of Lobbyist(s) _	Jooi	Grimbilas,	Adam	Schmidt	NEW HAMPSHIRE DEPARTMENT OF STATE
II. Name of lobbyist's pa	artnership, fir	m or corporation, if a	ny:		
J. Grimbilia (Name o	5 Stvai f partnership, fi	tegic Solution	ons lla	·	<del></del>
Obox 2-33 Business Address: (Street	)	NorThwo (Town/City)	od	(State)	0 3 8 8 4 · (Zip Code)
(403) 496-2638 (Telephone)	3	( )(Fax)	е-п	nail Jodi G	) jgstrategiès.com.
III. This statement cover reportable expense trans					e a separate report for
☐ All reportable transact	tions occurring	in the months prior to t	the reporting da	te relative to the following	lowing client:
•	Thate full Name of Cli	ent as it appears on the Lo		on Form)	<del></del>
OR All reportable transactiunrelated to any particular	-	byist (including the lobl	byist's family),	or the lobbying firm	tisted below which are
•	April 24, 2019 From date of reg	Stration to 3/31/19		1, 2019 🔲 1/1/19 to 6/30/19	
	October 30, 20 wity from 7/1/19			y 29, 2020 □ 10/1/19 to 12/31/19	
V. There have been no If this box is checked, com Concord, NH 03301.	fees receive plete just this	d and no reportable form and submit it to the	<b>transactions</b> e Secretary of S	made since the la tate's Office, State I	st report.   House, Room 204;
VI. Check if additional r					
☐ If you have received f					
<ul> <li>If you have paid an ho Expense Reimbursement</li> </ul>	norarium of re	eimbursea expenses, yoi	i must file <b>Add</b>	endum <b>b</b> – Report C	or Honorariums of
☐ If you, your firm, or y	our family has	made political contribu	tions, you must	file Addendum C-	- Political Contributions
Sworn Statement/Affirm I have read RSA 15, RSA and complete to the best o	15-B, RSA 14 f my knowledg	-C and RSA 664 and he ge and belief.	reby swear or a	ffirm that the forego	oing information is true
(Signature of lobbyist)	mh		_ 4	22 17.	<u> </u>
(organization)				(Date)	
(Print Name of lobbyist)	las	<del></del>			

## State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying par	tnership, firm, or corpo	oration: J. Grimb	ilas StrategicSolutions	CIC.
			corporation and not related to an	
particular client):	_			
Date of Report (check	one):			
April 24, 2019 🔽	July 31, 2019 🗆	October 30, 2019 🗆	January 29, 2020	
•			d Expenses described above, and imber of Addendum forms being	
Addendum A(s	s).			
Addendum B(s	).			
Addendum C(s	).			•
I hereby swear or affirm complete to the best of 'Augusta' (Signature of lobbyist)	<b>4 2</b>		t and each Addendum is true and  U1) 3/19  (Date)	i
Adm Sch	usat			
Print Name of lobbyist	)			